11-25-05

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(Depositor's nam (Signature) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/920,810	08/03/2001	Celine Feger	3806.0509-00	7154

TITLE OF INVENTION: DALFOPRISTINE/OUINUPRISTINE COMBINATIONS WITH CEFPIROME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400		\$300	\$1700	11/22/2005		
EXAMINER		ART UNIT		CLASS-SUBCLASS				
MELLER, MICHAEL V 1655			514-009000	'				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
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(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Jones Pharma Incorporated Bristol, Tennessee								
Please check the appropriat	e assignee category or catego	ories (will not be pr	inted on the p	oatent): 🗖 Individual 🚨 Co	orporation or other private g	roup entity Government		
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Advance Order - # o			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number $\frac{50-3013}{}$ (enclose an extra copy of this form).					
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The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the rec	is requested to apply the Iss Publication Fee (if required) ords of the United States Pat	ue Fee and Publicat will not be accepted ent and Trademark	tion Fee (if and if the first term and if the first term and if the first term if the first term is a second in the first term in the firs	ny) or to re-apply any previously e other than the applicant; a regi	y paid issue fee to the applic stered attorney or agent; or	ation identified above. the assignee or other party in		
Authorized Signature	Thomas H. Ron	ven by.	Jacque	line Benn Date /	November 22,	2005		
Typed or printed name	Thomas G. Rov	van Re	(UND43	492 Registration	November 22, No. 34,419			

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